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CONFIRMATION NO. 9727

<b>SERIAL NUMBER</b> 10/820,937	<b>FILING OR 371(c) DATE</b> 04/08/2004 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3766	<b>ATTORNEY DOCKET NO.</b> P-21023.00US
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## APPLICANTS

Lisa Lynn Shafer, Stillwater, MN;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/507,855 10/01/2003 @ 05-31-06

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

- none - @ 05-31-06

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/20/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 26	<b>TOTAL CLAIMS</b> 69	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged Examiner's Signature <u>05-31-06</u> Initials				

## ADDRESS

27581

## TITLE

Device and method for inhibiting release of pro-inflammatory mediator

<b>FILING FEE RECEIVED</b> 1652	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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